

# Vermont Medicaid and Exchange Advisory Committee Meeting Agenda

1.	10:00	<b>Call to Order</b>	Mary Kate Mohlman & Sharon Henault, Co-Chairs
2.	10:05	<b>Roll Call Establish Quorum Approve Previous Minutes</b>	Zack Goss, Director of Customer Communication (Department of Vermont Health Access, "DVHA")
3.	10:10	<b>FY25 Budget Letter Subcommittee</b>	Mary Kate Mohlman & Sharon Henault, Co-Chairs
4.	10:30	<b>Medicaid Renewal Status Update</b>	Adaline Strumolo, Deputy Commissioner (DVHA)
5.	10:50	<b>Open Enrollment</b>	Dan Fay, Interim Healthcare Eligibility & Enrollment Director (DVHA) Zack Goss, Director of Customer Communication
6.	11:00	<b>Assister Program</b>	Stacy DeSisto, Administrative Services Manager
7.	11:25	<b>MSP Eligibility</b>	Mike Fisher, Chief Health Care Advocate, Vermont Legal Aid
8.	11:40	<b>Commissioner's Office Update</b>	Andrea De La Bruere, Commissioner (DVHA) Adaline Strumolo, Deputy Commissioner (DVHA)
9.	11:50	<b>Public Comment</b>	Mary Kate Mohlman & Sharon Henault, Co-Chairs
10.	11:55	<b>Final Committee Discussion</b>	Mary Kate Mohlman & Sharon Henault, Co-Chairs
11.	12:00	<b>Adjourn</b>	Mary Kate Mohlman & Sharon Henault, Co-Chairs

**October 23, 2023**  
**10:00-12:00 pm**



# **Roll Call, Quorum, September 25, 2023 Meeting Minutes**

Zack Goss, Director of Customer Communication (DVHA)

# FY25 Budget Letter Subcommittee

Mary Kate Mohlman & Sharon Henault , Co-Chairs

# Medicaid Renewal Status Update

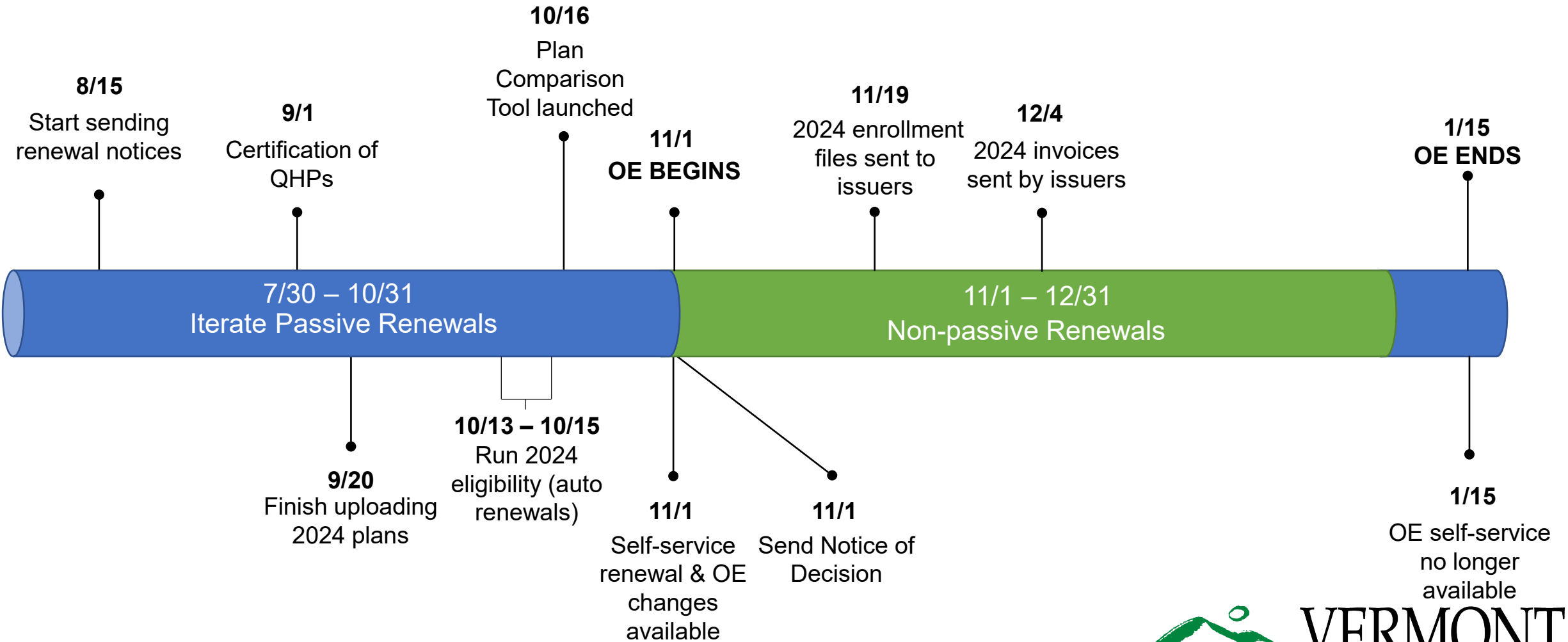
Adaline Strumolo, Deputy Commissioner (DVHA)

# Medicaid Renewal Dashboards - Discussion

# Open Enrollment

Dan Fay, Interim Healthcare Eligibility & Enrollment Director (DVHA)  
Zack Goss, Director of Customer Communication (DVHA)

# VHC 2024 Open Enrollment & Renewal Period



# Open Enrollment Communication

## Indirect Communication

- Social Media
- Press Release
- Town Hall
- [Plan Comparison Tool](#)
- [General Education](#)

## Partner Communication

- Stakeholder Newsletter
- Assister training
- [Stakeholder Toolkit](#)



Vermont Health Connect

## Inscripción Abierta 2024



Del 1 de Noviembre 2023 al  
15 de Enero 2024

 NECESITA SEGURO MÉDICO?	 NECESITA RENOVAR SU SEGURO MÉDICO?	 NECESITA REPORTAR UN CAMBIO EN SU VIDA?
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Tenemos ayuda  
disponible

Por Teléfono: 1-855-899-9600  
Encuentre un Asistente en línea en:  
[www.VermontHealthConnect.gov](http://www.VermontHealthConnect.gov)



## Direct Communication

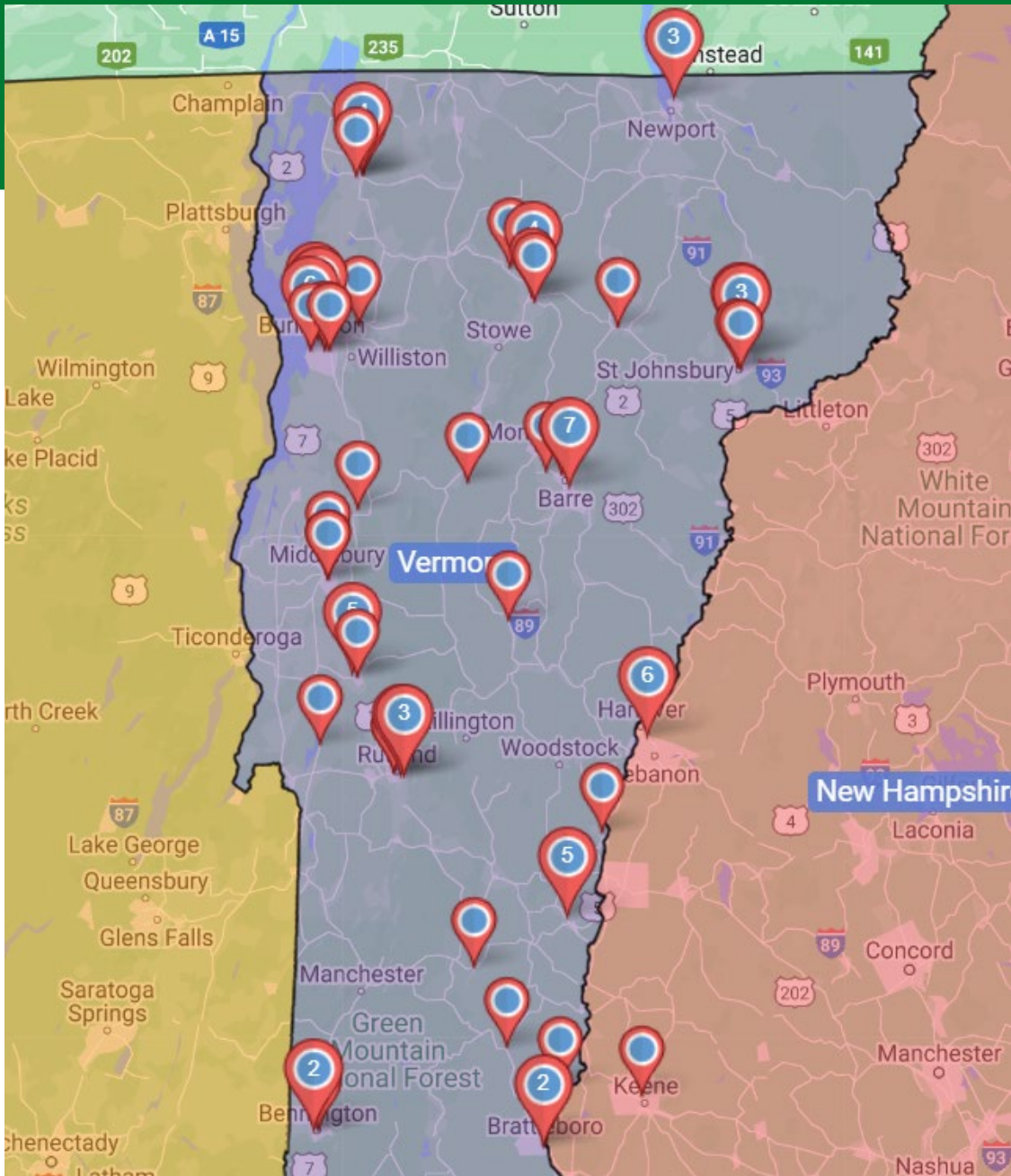
- Notices
- Postcards
- Emails
- Text messages
- Phone outreach



# Assister Program

Stacy DeSisto, Assister Program Manager (DVHA)

# Program Overview



The Assister Program is dedicated to helping any person overcome barriers to obtaining or maintaining their coverage through the marketplace.



Assisters can provide services ranging from consultative support to completing applications on behalf of our customers.



**PEOPLE'S HEALTH &  
WELLNESS CLINIC**



**Bridges to Health**  
**Puentes a la Salud**



**THE COMMUNITY  
RESTORATIVE  
JUSTICE CENTER**



**AGENCY OF HUMAN SERVICES  
DEPARTMENT OF VERMONT HEALTH ACCESS**



EQUALITY



EQUITY



**VERMONT**

**AGENCY OF HUMAN SERVICES  
DEPARTMENT OF VERMONT HEALTH ACCESS**





## CORE PRINCIPLES:

### **Health Equity**

All people have a fair and just opportunity to be health

### **Accessibility**

Easily accessed and understood

### **Accountability/Integrity**

Be responsible, prudent, transparent, and trustworthy

# The impact.



12,485 Households Supported in the last year (and counting)



Last year's Open Enrollment achieved the highest service levels since the inception of the program in 2015.



# Recruitment



Insurance Coverage is a fundamental steppingstone on the path to well-being.

# Recruitment Goals

Within the next 12 months:

1. **Invigorate** the roster.
2. **Improve** connections with leaders of pertinent organizations.
3. **Increase** the number of non-clinical organizations on the roster.

# Seeking Advice



**Targeted Outreach:** What areas, organizations, or populations do you feel it would be meaningful to focus on? Why?



**Challenges Faced:** How can we help strained organizations make room for this critical service? Thoughts or strategies.



# Help Us Connect



**Collaboration and Connection:** Consider inviting or involving us with events and introduce us to potential partner organizations.



**Boosting Visibility:** Spread the word! Your network can play a significant role in increasing our program's recognition.

# Questions?

**Stacy DeSisto**, Assister Program Manager

[Stacy.DeSisto@Vermont.gov](mailto:Stacy.DeSisto@Vermont.gov)

Learn more or find an Assister:

[Info.HealthConnect.Vermont.gov/Find-Local-Help](https://Info.HealthConnect.Vermont.gov/Find-Local-Help)

# MSP Eligibility

Mike Fisher, Chief Health Care Advocate, Vermont Legal Aid

# Expand Vermont's Medicare Savings Programs



**The Office of the Health Care Advocate**

*Emma Zavez, Consumer Research & Health Policy Analyst*

*Mike Fisher, Chief Health Care Advocate*

**October 23, 2023**





# The Problem



## Many low-income Vermonters on Medicare can't afford the health care services they need.

“The premiums are more with much less coverage - i just don't go to the dr anymore because of the deductible and copays - i never know what they will be and can't take the chance.”

“I am paying more for premiums for Medicare and Supplemental coverage than I was paying under Vermont Health Connect. I expected it to be the opposite.”

“I stopped taking my anti-depressants because of the co-pays, and other supplements that used to be covered are no longer covered like calcium and vitamin D which I need, so I don't use them anymore.”



### Part A



Hospital Insurance

### Part B



Medical Insurance

### Part D



Drug Coverage

## Medicare Costs in 2024

Part B (out-patient) premium:

- **\$174.70 per month (\$2,096 per year)**

Avg. Part D (prescription drug) premium in VT:

- **\$66 per month (\$792 per year)**

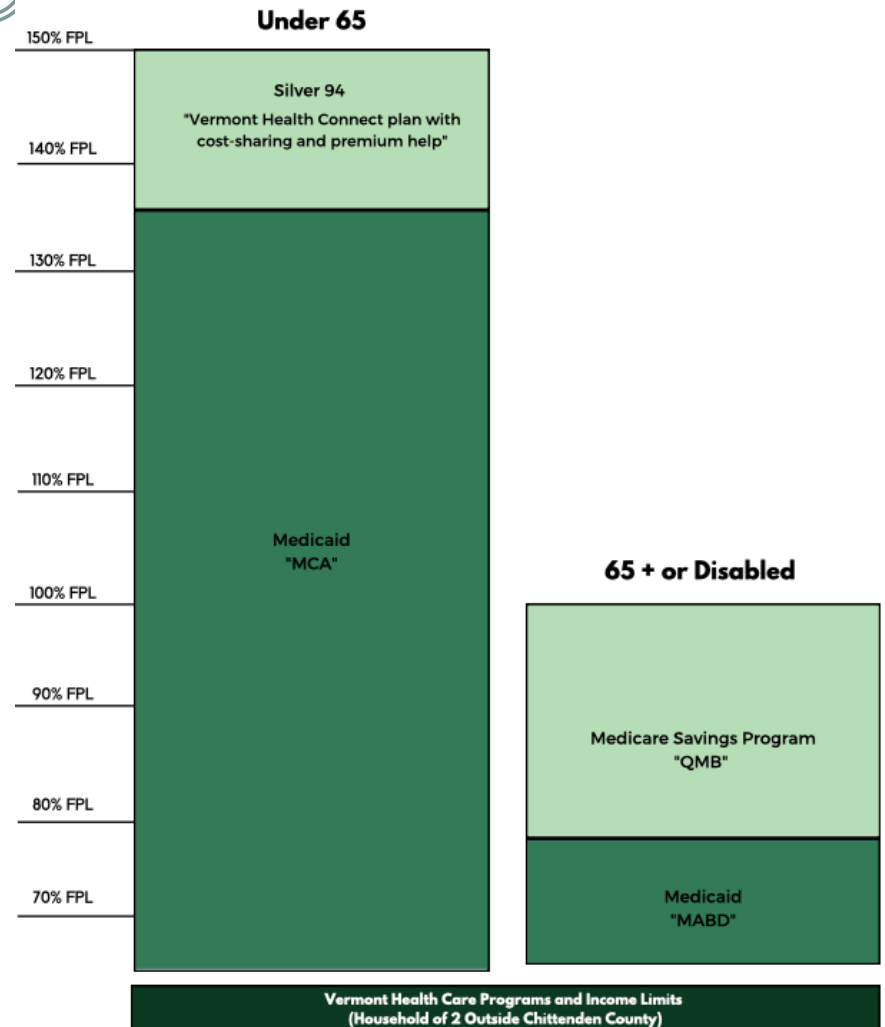
Separate hospital, outpatient, and prescription deductibles. Ex:

- Part B deductible: **\$240**
- Part A deductible: **\$1,632** for each in-patient hospital stay per benefit period

Cost-sharing of **20%** for many services.

# “The Senior and Disabled Penalty”

You can make the same amount of money and your household size can be the same – but suddenly, your access to low-cost health care is greatly diminished. You fall off the "cliff."



# Example: MCA to Medicare

- Julie and David live on a fixed income of \$23,664 (120% FPL) per year. Before they turned 65 they had Medicaid for Children & Adults (MCA). MCA is premium free and has low out-of-pocket costs.
- After turning 65, they no longer qualify for Medicaid. Now they qualify for SLMB. SLMB is a Medicare Savings Program that pays their Part B premium but does not cover out-of-pocket costs.

MEDICARE COST-SHARING FOR MINIMAL MEDICAL NEEDS	MEDICARE COST-SHARING FOR MODERATE MEDICAL NEEDS	MEDICARE COST-SHARING FOR HIGH MEDICAL NEEDS
		
APPROXIMATE OUT-OF-POCKET: \$708 PER YEAR	APPROXIMATE OUT-OF-POCKET: \$1,791 PER YEAR	APPROXIMATE OUT-OF-POCKET: \$5,694 PER YEAR

How can we afford this ?






# Example: MCA to Medicare



- Eliza receives Social Security Disability Income (SSDI) and lives on \$15,552 (107% FPL) per year in Chittenden County. She has Medicaid for Children and Adults (MCA) which is premium free and has low co-pays.
- In her 25<sup>th</sup> month of receiving SSDI, she is auto-enrolled in Medicare. She is over-income for Medicaid for the Aged, Blind & Disabled and QMB – the two programs that could have lowered her deductibles and co-pays.
- She is eligible for SLMB, a Medicare Savings Program that pays her Part B premium only. She will have to pay deductibles and co-pays out-of-pocket.
- She used to pay \$0 in premiums and \$1-\$2 in co-pays for doctor appointments. Now she can either buy a medigap plan for hundreds of dollars each month or pay her deductibles and 20% cost-sharing out-of-pocket.

# Example: VHC to Medicare



<p><b>Part A</b></p>  <p>Hospital Insurance</p>	<p><b>Monthly Premium: \$0</b></p> <p>For those who paid Medicare taxes for ten years or more or who go onto Medicare before 65</p> <ul style="list-style-type: none"><li>• Deductible for in-patient hospital stays</li><li>• Co-payments and or cost-sharing for some hospices, home health care, and skilled nursing facility stays</li></ul>
<p><b>Part B</b></p>  <p>Medical Insurance</p>	<p><b>Monthly Premium: \$174.70</b></p> <ul style="list-style-type: none"><li>• 20 % cost-sharing on these health care services. There is no annual maximum out-of-pocket</li></ul>
<p><b>Part D</b></p>  <p>Drug Coverage</p>	<p><b>Monthly Premium: \$15</b></p> <p>They will qualify for pharmacy assistance through VPharm</p> <ul style="list-style-type: none"><li>• VPharm will help pay your monthly Part D premium.</li><li>• VPharm will lower many of your drug copays to \$1 or \$2 for each prescription.</li></ul>

- Karen and Juan make \$29,580 (150% FPL) per year. Before they turned 65, they had a couple plan through Vermont Health Connect (VHC). They qualified for financial assistance that helped them pay for their premiums and cost-sharing. They had low out-of-pocket costs.
- They are now on Medicare. They make too much to qualify for a Medicare Savings Program. They pay all of their Medicare costs out-of-pocket.

# Eligibility expansions in other states



	QMB	SLMB	QI-1
<b>New York</b>	138%	N/A	186%
<b>Maine</b>	150%	170%	185%
<b>Indiana</b>	150%	170%	185%
<b>Massachusetts</b>	190%	210%	225%
<b>Connecticut</b>	211%	231%	246%
<b>D.C.</b>	300%	N/A	N/A



*Income eligibility threshold expressed as a percent of the Federal Poverty Level (FPL)*

# Legislative Proposal



## **H.118 / S.61 - An act relating to Medicare Savings Program Eligibility**

Expand the income limit for the Medicare Savings Programs:

- QMB up to 150% of the Federal Poverty Level (FPL)
- Eliminate SLMB
- Expand QI-1 to 185% FPL



# Questions / Discussion



# Proposed Motion



*The Medicaid Exchange and Advisory Committee recommends that the Dept. Of Vermont Health Access increase the income eligibility threshold for the Medicare Savings Programs (MSPs) to improve affordability and access to care for Vermonters on Medicare.*

# Commissioner's Office Update

Andrea De La Bruere, Commissioner (DVHA)

Adaline Strumolo, Deputy Commissioner (DVHA)

# Public Comment & Final Committee Discussion

## Adjourn

Mary Kate Mohlman & Sharon Henault , Co-Chairs